

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



July 30, 2004

Regulation Package #0702-17

CDSS MANUAL LETTER NO. CCL-04-12

TO: HOLDERS OF THE COMMUNITY CARE LICENSING MANUAL, TITLE 22, DIVISION 6,
CHAPTER 8, RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

Regulation Package #0702-17**Effective 7/3/04**

Sections 87101, 87111, 87222, 87451, 87565, 87566, 87569, 87570, 87582, 87591, 87593, 87724, 87725, 87725.1, and 87725.2

This manual letter has been posted on the Office of Regulations Development website at http://www.dss.cahwnet.gov/ord/Residentia_635.htm.

The attached regulations implement the requirements of AB 1753 (Romero), Chapter 434, Statutes of 2000 that is specific to Residential Care Facilities for the Elderly (RCFEs). This legislation imposes requirements for licensees who advertise/promote dementia special care, programs, and/or environments for residents with dementia. Also, this legislation amends Sections 1569.15(m), 1569.33(d) and adds Sections 1569.626 and 1569.627 to the Health and Safety Code. Statute requires the licensee to disclose the facility's specialized services, programs and environments that pertain to dementia special care in its plan of operation and to the public upon request. In addition, it requires the licensee to ensure that direct care staff, who provide care to residents with dementia, receive six hours of resident care orientation within the first four weeks of employment. They must also receive eight hours of in-service training per year on the subject of caring for residents with dementia.

These regulations were considered at the Department's public hearing held on January 15, 2003.

FILING INSTRUCTIONS

Revisions to all manuals are indicated by a vertical line in the left margin. The attached pages are to be entered in your copy of the Manual of Policies and Procedures. The latest prior manual letter containing Community Care Licensing changes was Manual Letter No. CCL-04-11. The latest prior manual letter containing Residential Care Facilities for the Elderly regulation changes was Manual Letter No. CCL-04-11.

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- (d) (1) Day. "Day" means calendar day unless otherwise specified.
- (2) Deficiency. "Deficiency" means any failure to comply with any provision of the Residential Care Facilities Act for the Elderly and regulations adopted by the Department pursuant to the Act.
- (3) Delayed Egress Device. "Delayed Egress Device" means a special egress-control device of the time delay type as specified in Health and Safety Code Section 1569.699(a).

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- (A) Health and Safety Code Section 1569.699(a) reads:

When approved by the person responsible for enforcement as described in Section 13146, exit doors in facilities classified as Group R, Division 2 facilities under the California Building Standards Code, licensed as residential care facilities for the elderly, and housing clients with Alzheimer's disease or dementia, may be equipped with approved listed special egress-control devices of the time-delay type, provided the building is protected throughout by an approved automatic sprinkler system and an approved automatic smoke-detection system. The devices shall conform to all of the following requirements:

- (1) Automatic deactivation of the egress-control device upon activation of either the sprinkler system or the detection system.
- (2) Automatic deactivation of the egress-control device upon loss of electrical power to any one of the following: The egress-control device; the smoke-detection system; exit illumination as required by Section 1012 of the California Building Code.
- (3) Be capable of being deactivated by a signal from a switch located in an approved location.

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87101 DEFINITIONS (Continued)

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- (4) Initiate an irreversible process that will deactivate the egress-control device whenever a manual force of not more than 15 pounds (66.72N) is applied for two seconds to the panic bar or other door-latching hardware. The egress-control device shall deactivate within an approved time period not to exceed a total of 15 seconds, except that the person responsible for enforcement as described in Section 13146 may approve a delay not to exceed 30 seconds in residential care facilities for the elderly serving patients with Alzheimer's disease. The time delay established for each egress-control device shall not be field adjustable.
- (5) Actuation of the panic bar or other door-latching hardware shall activate an audible signal at the door.
- (6) The unlatching shall not require more than one operation.
- (7) A sign shall be provided on the door located above and within 12 inches (305mm) of the panic bar or other door-latching hardware reading:

KEEP PUSHING, THIS DOOR WILL OPEN IN ____ SECONDS, ALARM WILL SOUND.

Sign letters shall be at least one inch (25mm) in height and shall have a stroke of not less than 1/8 inch (3.3mm).

- (8) Regardless of the means of deactivation, relocking of the egress-control device shall be by manual means only at the door.

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- (4) Dementia. "Dementia" means the loss of intellectual function (such as thinking, remembering, reasoning, exercising judgement and making decisions) and other cognitive functions, sufficient to interfere with an individual's ability to perform activities of daily living or to carry out social or occupational activities. Dementia is not a disease itself, but rather a group of symptoms that may accompany certain conditions or diseases, including Alzheimer's Disease. Symptoms may include changes in personality, mood, and/or behavior. Dementia is irreversible when caused by disease or injury, but may be reversible when caused by depression, drugs, alcohol, or hormone/vitamin imbalances.
- (5) Department. "Department" is defined in Health and Safety Code, Section 1569.2(b).

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"Department" means the State Department of Social Services.

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- (6) Department of Justice Clearance. "Department of Justice Clearance" means an individual has no felony or misdemeanor convictions reported by the California Department of Justice. However, the individual may have been arrested with no criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.
- (7) Dietitian. "Dietitian" means a person who is eligible for registration by the American Dietetic Association.
- (8) Direct care staff. "Direct care staff" means the licensee, and/or those individuals employed by the licensee, who provide direct care to the residents, including, but not limited to, assistance with activities of daily living.
- (9) Director. "Director" is defined in Health and Safety Code, Section 1569.2(c).

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"Director" means the Director of the State Department of Social Services.

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- (10) Do-Not-Resuscitate (DNR) Form. "Do-Not-Resuscitate Form" means the pre-hospital do-not-resuscitate forms developed by the California Emergency Medical Services Authority and by other local emergency medical services agencies. These forms, when properly completed by a resident or (in certain instances) a resident's Health Care Surrogate Decision Maker, and by a physician, alert pre-hospital emergency medical services personnel to the resident's wish to forego resuscitative measures in the event of the resident's cardiac or respiratory arrest.
- (11) Documentation. "Documentation" means written supportive information including but not limited to the Licensing Report (Form LIC 809).
- (e) (1) Egress Alert Device. "Egress Alert Device" means a wrist band or other device which may be worn by a resident or carried on a resident's person, which triggers a visual or auditory alarm when the resident leaves the facility building or grounds.

87101 DEFINITIONS (Continued)**87101**

- (2) Elderly Person. "Elderly Person" means, for purposes of admission into a residential care facility for the elderly, a person who is sixty (60) years of age or older.
- (3) Emergency Approval to Operate. "Emergency Approval to Operate" (EAO) means a temporary approval to operate a facility for no more than 60 days pending the issuance or denial of a license by the licensing agency.
- (4) Evaluator. "Evaluator" means any person who is a duly authorized officer, employee or agent of the Department including any officer, employee or agent of a county or other public agency authorized by contract to license community care facilities.
- (5) Evidence of Licensee's Death. "Evidence of Licensee's Death" shall include, but is not limited to, a copy of the death certificate, obituary notice, certification of death from the decedent's mortuary, or a letter from the attending physician or coroner's office verifying the death of the licensee.
- (6) Exception. "Exception" means a variance to a specific regulation based on the unique needs or circumstances of a specific resident or staff person. Requests for exceptions are made to the licensing agency by an applicant or licensee. They may be granted for a particular facility, resident or staff person, but cannot be transferred or applied to other individuals.
- (7) Existing Facility. "Existing Facility" means any facility operating under a valid license on the date of application for a new license.
- (f) (1) Facility Hospice Care Waiver. "Facility Hospice Care Waiver" means a waiver from the limitation on retention of residents who require more care and supervision than other residents and residents who are bedridden other than for a temporary illness. The Hospice Care Waiver granted by the Department will permit the retention in a facility of a designated maximum number of terminally ill residents who are receiving hospice services from a hospice agency. The Facility Hospice Care Waiver will apply only to those residents who are receiving hospice care in compliance with a hospice care plan meeting the requirements of Section 87716.
- (2) Federal Bureau of Investigation (FBI) Clearance. "Federal Bureau of Investigation Clearance" means an individual has no felony or misdemeanor convictions reported by the FBI. The individual may also have been arrested with no criminal conviction, convicted of a minor traffic offense or adjudicated as a juvenile.
- (g) (1) Guardian. "Guardian" means a person appointed by the Superior Court pursuant to the provisions of Section 1500 et seq. of the Probate Code to care for the person, or person and estate, of another.

87101 DEFINITIONS (Continued)**87101**

- (h) (1) Healing wounds include cuts, stage one and two dermal ulcers as diagnosed by a physician, and incisions that are being treated by an appropriate skilled professional with the affected area returning to its normal state. They may involve breaking or laceration of the skin and usually damage to the underlying tissues.
- (2) Health Care Provider. "Health Care Provider" means those persons described in Probate Code Section 4615: "a person who is licensed, certified, or otherwise authorized or permitted by the law of this state to administer health care in the ordinary course of business or practice of a profession."

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87101 DEFINITIONS (Continued)**87101**

- (2) Licensed Professional. "Licensed Professional" means a person who is licensed in California to provide medical care or therapy. This includes physicians and surgeons, physician assistants, nurse practitioners, registered nurses, licensed vocational nurses, psychiatric technicians, physical therapists, occupational therapists and respiratory therapists, who are operating within his/her scope of practice.
- (3) Licensee. "Licensee" means the individual, firm, partnership, corporation, association or county having the authority and responsibility for the operation of a licensed facility.
- (4) Licensing Agency. "Licensing Agency" means a state, county or other public agency authorized by the Department to assume specified licensing, approval or consultation responsibilities pursuant to Section 1569.13 of the Health and Safety Code.
- (m) (1) Medical Professional. "Medical Professional" means an individual who is licensed or certified in California to perform the necessary medical procedures within his/her scope of practice. This includes, but is not limited to, Medical Doctor (MD), Registered Nurse (RN) and Licensed Vocational Nurse (LVN).
- (2) Mild Cognitive Impairment. "Mild cognitive impairment" (MCI) refers to people whose cognitive abilities are in a "conditional state" between normal aging and dementia. Normal age-related memory changes can include forgetting a person's name or the location of an object, however, individuals with MCI have difficulty with short-term memory loss. MCI is a state in which at least one cognitive function, usually short-term memory, is impaired to an extent that is greater than would be anticipated in the normal aging process. MCI is characterized by short-term memory problems, but no other symptoms of dementia (e.g., problems with language, judgement, changes in personality or behavior) that affect a person's daily functioning. Individuals with MCI may experience some difficulty with intellectually demanding activities, but lack the degree of cognitive and functional impairment required to meet diagnostic criteria for dementia.
- (n) (1) New Facility. "New Facility" means any facility applying for an initial license whether newly constructed or previously existing for some other purpose.
- (2) Nonambulatory Person. "Nonambulatory Person" means a person who is unable to leave a building unassisted under emergency conditions. It includes, but is not limited to, those persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs. It also includes persons who are unable, or likely to be unable, to respond physically or mentally to an oral instruction relating to fire danger and, unassisted, take appropriate action relating to such danger.

87101 DEFINITIONS (Continued)**87101**

- (3) Non-Compliance Conference. "Non-Compliance Conference" means a meeting initiated by the Department that takes place between the licensing agency and the licensee to afford the licensee an opportunity to correct licensing violations other than those that pose an immediate danger to residents and that may result in a corrective plan of action. Its purpose is to review the existing deficiencies and to impress upon the licensee the seriousness of the situation prior to the agency requesting administrative action to revoke the license. The Department may initiate administrative action without a non-compliance conference.
- (4) Nutritionist. "Nutritionist" means a person holding a master's degree in food and nutrition, dietetics, or public health nutrition, or who is employed by a county health department in the latter capacity.
- (o) (Reserved)
- (p) (1) Physician. "Physician" means a person licensed as a physician and surgeon by the California Board of Medical Examiners or by the California Board of Osteopathic Examiners.
- (2) Placement Agency. "Placement Agency" as defined in Health and Safety Code Section 1569.47(a), means any county welfare department, county social services department, county mental health department, county public guardian, general acute care hospital discharge planner or coordinator, state-funded program or private agency providing placement or referral services, and regional center for persons with developmental disabilities which is engaged in finding homes or other places for the placement of elderly persons for temporary or permanent care.
- (3) "PRN Medication" (pro re nata) means any nonprescription or prescription medication which is to be taken as needed.
- (4) Provision or Provide. Whenever any regulation specifies that provision be made for or that there be provided any service, personnel or other requirement, it means that if the resident is not capable of doing so himself, the licensee shall do so directly or present evidence satisfactory to the licensing agency of the particular arrangement by which another provider in the community will do so.
- (5) Provisional License. "Provisional License" means a temporary, nonrenewable license, issued for a period not to exceed twelve months which is issued in accordance with the criteria specified in Section 87231.
- (q) (Reserved)

87101 DEFINITIONS (Continued)**87101**

- (r) (1) Rehabilitation. "Rehabilitation" means that period of time, together with any education, counseling or therapy, training, stable employment, restitution, remorse, changes in lifestyle, or community service, which assist an individual in reestablishing good character.
- (2) Relative. "Relative" means spouse, parent, stepparent, son, daughter, brother, sister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin or any such person denoted by the prefix "grand" or "great", or the spouse of any of the persons specified in this definition, even if the marriage has been terminated by death or dissolution.
- (3) Renewal Vendor Application. "Renewal Vendor Application" means the application form, LIC 9141, used to request approval from the Department to continue another two (2) years as an approved vendor.
- (4) Request to Forego Resuscitative Measures. A "Request to Forego Resuscitative Measures" is defined in Probate Code Section 4753(b).

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87101 DEFINITIONS (Continued)**87101**

- (B) A facility which is "providing care and supervision" as defined in Section 87101c.(2) includes, but is not limited to, one in which individual has been placed by a placement agency or family members.
- (C) A facility which is "held out as or represented as providing care and supervision" includes, but is not limited to:
 - (1) A facility whose license has been revoked or denied, but the individual continues to provide care for the same or different clients with similar needs.
 - (2) A facility where change of ownership has occurred and the same clients are retained.
 - (3) A licensed facility that moves to a new location.
 - (4) A facility which advertises as providing care and supervision.
- (D) A facility which "accepts or retains residents who demonstrate the need for care and supervision" includes, but is not limited to:
 - (1) A facility with residents requiring care and supervision, even though the facility is providing board and room only, or board only, or room only.
 - (2) A facility where it is apparent that care and supervision are being provided by virtue of the client's needs being met.
- (v) (1) Vendor. "Vendor" means a Department-approved institution, association, individual(s), or other entity that assumes full responsibility or control over a Department-approved Initial Certification Training Program and/or a Continuing Education Training Program.
- (2) Vendor applicant. "Vendor applicant" means any institution, association, individual(s), or other entity that submits a request for approval of an Initial Certification Training Program and/or a Continuing Education Training Program.
- (3) Voluntary. "Voluntary" means resulting from free will.
- (w) (1) Waiver. "Waiver" means a variance to a specific regulation based on a facility-wide need or circumstance which is not typically tied to a specific resident or staff person. Requests for waivers are made to the licensing agency, in advance, by an applicant or licensee.

87101 DEFINITIONS (Continued)**87101**

(x) (Reserved)

(y) (Reserved)

(z) (Reserved)

NOTE: Authority cited: Sections 1569.23, 1569.30, 1569.616, and 1569.698, Health and Safety Code. Reference: 42 CFR 418.3; Sections 1569.1, 1569.2, 1569.5, 1569.10, 1569.145, 1569.15, 1569.153, 1569.157, 1569.158, 1569.17, 1569.19, 1569.191, 1569.193, 1569.20, 1569.21, 1569.23, 1569.31, 1569.312, 1569.33, 1569.38, 1569.44, 1569.47, 1569.54, 1569.616, 1569.626, 1569.699, 1569.73, 1569.74, 1569.82, 1797.196, and 1771, Health and Safety Code; Section 15610.13, Welfare and Institutions Code; and Sections 1800, 4615, 4650, and 4753, Probate Code.

87102 DEFINITIONS - FORMS**87102**

The following forms, which are incorporated by reference, apply to the regulations in Title 22, Division 6, Chapter 8 (Residential Care Facilities for the Elderly).

- (a) LIC 9139 (2/01) - Renewal of Continuing Education Course Approval, Administrator Certification Program.
- (b) LIC 9140 (6/01) - Request for Course Approval, Administrator Certification Program.
- (c) LIC 9141 (5/01) - Vendor Application/Renewal, Administrator Certification Program.
- (d) PUB 325 (3/99) – Your Right To Make Decisions About Medical Treatment.
- (e) Core of Knowledge Guidelines (6/01/01) - RCFE 40-Hour Initial Certification.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1530 and 1569.616(i), Health and Safety Code; and Section 15376, Government Code.

87108 INTEGRAL FACILITIES**87108**

- (a) Upon written application, the licensing agency may issue a single license to integral facilities conducting multiple, related programs which would otherwise require separate licenses provided all of the following requirements are met:
- (1) Separate buildings or portions of the facility shall be integral components of a single program.
 - (2) All components of the program shall be managed by the same licensee.
 - (3) All components of the program shall be conducted at a single site.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Section 1569.30, Health and Safety Code.

87110 LIMITATIONS -- CAPACITY AND AMBULATORY STATUS**87110**

- (a) A licensee shall not operate a facility beyond the conditions and limitations specified on the license, including specification of the maximum number of persons who may receive services at any one time. An exception may be made in the case of catastrophic emergency when the licensing agency may make temporary exceptions to the approved capacity.
- (b) Resident rooms approved for 24-hour care of ambulatory residents only shall not accommodate nonambulatory residents. Residents whose condition becomes nonambulatory shall not remain in rooms restricted to ambulatory residents.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.31 and 1569.312, Health and Safety Code.

87111 ADVERTISEMENTS AND LICENSE NUMBER**87111**

- (a) In accordance with Health and Safety Code Sections 1569.68 and 1569.681, licensees shall reveal each facility license number in all public advertisements, including Internet, or correspondence.

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- (1) Health and Safety Code, Section 1569.681 provides:
- (a) Each residential care facility for the elderly licensed under this chapter shall reveal its license number in all advertisements, publications, or announcements made with the intent to attract clients or residents.
 - (b) Advertisements, publications, or announcements subject to the requirements of subdivision (a) referred to herein include, but are not limited to, those contained in the following:
 - (1) Newspaper or magazine.
 - (2) Consumer report.
 - (3) Announcement of intent to commence business.
 - (4) Telephone directory yellow pages.
 - (5) Professional or service directory.
 - (6) Radio or television commercial.
- (2) Health and Safety Code, Section 1569.68 provides:

All residential care facilities shall be required to include their current license number in any public advertisement or correspondence.

HANDBOOK ENDS HERE

- (b) Licensees who operate more than one facility and use a common advertisement for these facilities shall be required to list each facility license number in accordance with Health and Safety Code Sections 1569.681 and 1569.68.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.68 and 1569.681, Health and Safety Code.

87112 FALSE CLAIMS**87112**

No licensee, officer or employee of a licensee shall make or disseminate any false or misleading statement regarding the facility or any of the services provided by the facility.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30 and 1569.44, Health and Safety Code.

87113 TRANSFERABILITY**87113**

- (a) The license shall not be transferable.
- (b) The licensee shall notify the licensing agency and all residents receiving services, or their responsible persons, in writing as soon as possible and in all cases at least sixty (60) days prior to the effective date that any change in ownership of the facility occurs as required by Health and Safety Code Section 1569.191(a)(1).
- (c) In all other instances, including a change in licensee, type of license, or location of the facility, the licensee shall notify the licensing agency and all residents receiving services, or their responsible persons, in writing as soon as possible and in all cases at least thirty (30) days prior to the effective date of that change.
- (d) In the case of change of ownership or licensee a new application for license shall be submitted by the prospective new licensee.

NOTE: Authority cited: Sections 1569.30 and 1569.30(a), Health and Safety Code. Reference: Sections 1569.11 and 1569.191, Health and Safety Code.

**87114 CONTINUATION OF LICENSE UNDER EMERGENCY
CONDITIONS/SALE OF PROPERTY****87114**

- (a) The licensing agency may consent to a change of location and continuation of the existing license of any facility for a reasonable period of time when the change is requested because of the accidental destruction of the licensed premises or similar emergency conditions, so long as the new location or place of performance conforms to building, fire and life safety standards.
- (b) In the event of a licensee's death, an adult who has control of the property, and had been designated by the licensee as the party responsible to continue operation of the facility upon a licensee's death shall:

87220 FIRE CLEARANCE**87220**

- (a) All facilities shall maintain a fire clearance approved by the city or county fire department, the district providing fire protection services, or the State Fire Marshal. Prior to accepting any of the following types of persons, the applicant or licensee shall notify the licensing agency and obtain an appropriate fire clearance, approved by the city or county fire department, the district providing fire protection services, or the State Fire Marshal, through the licensing agency:

- (1) Persons over 65 years of age.
- (2) Nonambulatory persons.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.30 and 1569.312, Health and Safety Code.

87222 PLAN OF OPERATION**87222**

- (a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related materials shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant changes in the plan of operation which would affect the services to residents shall be submitted to the licensing agency for approval. The plan and related materials shall contain the following:

- (1) Statement of purposes and program goals.
- (2) A copy of the Admission Agreement, containing basic and optional services.
- (3) Statement of admission policies and procedures regarding acceptance of persons for services.
- (4) Administrative organization.
- (5) Staffing plan, qualifications and duties.
- (6) Plan for training staff, as required by Section 87565(c).

87222 PLAN OF OPERATION (Continued)**87222**

- (7) Sketches, showing dimensions, of the following:
 - (A) Building(s) to be occupied, including a floor plan that describes the capacities of the buildings for the uses intended and a designation of the rooms to be used for nonambulatory residents.
 - (B) The grounds showing buildings, driveways, fences, storage areas, pools, gardens, recreation area and other space used by the residents.
- (8) Transportation arrangements for persons served who do not have independent arrangements.
- (9) A statement whether or not the applicant will handle residents' money and/or valuables. If money and/or valuables will be handled, the method for safeguarding pursuant to Sections 87225, 87226 and 87227.
- (10) A statement of the facility's policy concerning family visits and other communication with clients, as specified in Health and Safety Code Section 1569.313.

HANDBOOK BEGINS HERE

- (A) Section 1569.313 of the Health and Safety Code provides that:

This policy shall be designed to encourage regular family involvement with the client and shall provide ample opportunities for family participation in activities at the facility.

HANDBOOK ENDS HERE

- (11) If the licensee intends to admit and/or specialize in care for one or more residents who have a documented history of behaviors that may result in harm to self or others, the facility plan of operation shall include a description of precautions that will be taken to protect that resident and all other residents.
- (b) A licensee who advertises or promotes dementia special care, programming, and/or environments shall include additional information in the plan of operation as specified in Section 87725(a)(2).
- (c) A licensee who accepts or retains residents diagnosed by a physician to have dementia shall include additional information in the plan of operation as specified in Section 87724(b).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.15, 1569.157, 1569.175, 1569.2, 1569.30, 1569.31, 1569.312, 1569.313, 1569.316(a), 1569.626, and 1569.627, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

Article 5. Enforcement Provisions**87451 SERIOUS DEFICIENCIES - EXAMPLES****87451**

- (a) Regulations including but not limited to the following may result in serious deficiencies when a failure to comply presents an immediate or substantial threat to the physical health, mental health, or safety of the residents:
- (1) Section 87219 relating to criminal record clearance.
 - (2) Section 87220 relating to fire clearance.
 - (3) Section 87110 relating to limitations on the number or types of facility residents.
 - (4) Section 87573 relating to telephone service.
 - (5) Sections 87582(c)(1) or (2), or (4), or Section 87701 relating to persons with communicable diseases, persons requiring inpatient health care, persons who are bedridden, or persons with a prohibited health condition.
 - (6) Section 87110(b) relating to nonambulatory residents.
 - (7) Section 87572(a)(3) relating to resident rights.
 - (8) Section 87578(a) relating to restraints.
 - (9) Sections 87577(d)(3) through (7) or (e) relating to safety of resident accommodations.
 - (10) Sections 87576(b)(24), (25), or (27) relating to storage, preparation and service of food.
 - (11) Section 87575(b)(3) relating to medical and dental care of residents.
 - (12) Section 87575(c) relating to storing and dispensing medications.
 - (13) Section 87691(e)(2) relating to hot water temperature.

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87564.5 FORFEITURE OF A CERTIFICATE (Continued)**87564.5****HANDBOOK CONTINUES**

(b) If an application for a license or special permit indicates, or the department determines during the application review process, that the applicant had previously applied for a license under any of the chapters listed in paragraph (1) of subdivision (a) and the application was denied within the last year, the department shall, except as provided in Section 1569.22, cease further review of the application until one year has elapsed from the date of the denial letter. In those circumstances where denials are appealed and upheld at an administrative hearing, review of the application shall cease for one year from the date of the decision and order being rendered by the department. The cessation of review shall not constitute a denial of the application.

Health and Safety Code Section 1569.58(h), in pertinent part, provides that:

(1)(A) In cases where the excluded person appealed the exclusion order and there is a decision and order of the department upholding the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or from being a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

(1)(B) The excluded individual may petition for reinstatement one year after the effective date of the decision and order of the department upholding the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the decision and order.

(2)(A) In cases where the department informed the excluded person of his or her right to appeal the exclusion order and the excluded person did not appeal the exclusion order, the person shall be prohibited from working in any facility or being licensed to operate any facility licensed by the department or a certified foster parent for the remainder of the excluded person's life, unless otherwise ordered by the department.

(2)(B) The excluded individual may petition for reinstatement after one year has elapsed from the date of the notification of the exclusion order pursuant to Section 11522 of the Government Code. The department shall provide the excluded person with a copy of Section 11522 of the Government Code with the exclusion order.

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NOTE: Authority cited: Sections 1569.30 and 1569.616(j), Health and Safety Code. Reference: Sections 1558, 1568.092, 1569.16, 1569.58, 1569.616 and 1569.8897, Health and Safety Code.

87565 PERSONNEL REQUIREMENTS - GENERAL**87565**

- (a) Facility personnel shall at all times be sufficient in numbers, and competent to provide the services necessary to meet resident needs. In facilities licensed for sixteen or more, sufficient support staff shall be employed to ensure provision of personal assistance and care as required in Section 87578. Additional staff shall be employed as necessary to perform office work, cooking, house cleaning, laundering, and maintenance of buildings, equipment and grounds. The licensing agency may require any facility to provide additional staff whenever it determines through documentation that the needs of the particular residents, the extent of services provided, or the physical arrangements of the facility require such additional staff for the provision of adequate services.
- (b) All persons who supervise employees or who supervise or care for residents shall be at least eighteen (18) years of age.
- (c) All RCFE staff who assist residents with personal activities of daily living shall receive at least ten hours of initial training within the first four weeks of employment and at least four hours annually thereafter.
 - (1) This training shall be administered on the job, in a classroom setting, or any combination of the two.
 - (2) The training shall include, but not be limited to, the following:
 - (A) The aging process and physical limitations and special needs of the elderly. At least two (2) of the required ten (10) hours shall cover this subject.
 - (B) Importance and techniques of personal care services, including but not limited to, bathing, grooming, dressing, feeding, toileting, and universal precautions. At least three (3) of the required ten (10) hours shall cover this subject.
 - (C) Residents' rights, as specified in Section 87572.
 - (D) Policies and procedures regarding medications, including the knowledge in Section 87565(d)(4). At least two (2) of the required ten (10) hours shall cover this subject. Any on-the-job training provided for the requirements in Section 87565(d)(4) may also count towards the requirement in this subsection.
 - (E) Psychosocial needs of the elderly, such as recreation, companionship, independence, etc.
 - (F) Recognizing signs and symptoms of dementia in individuals.

87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)**87565**

- (3) All training shall be conducted by a person who is knowledgeable in a subject that is relevant to the subject area in which training is to be provided, and who satisfies at least one of the following criteria related to education and experience:
 - (A) Both a four-year college degree, graduate degree or professional degree, and two (2) years of experience in an area relevant to caring for the needs of the elderly, or
 - (B) License to work as a health care provider in California, or
 - (C) At least two years of experience in California as an administrator of an RCFE, within the last eight years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s).
- (4) Training may include use of books, video instruction tapes, interactive CD-ROMs and similar materials, upon the approval of that material by a trainer who satisfies the criteria of Section 87565(c)(3).
- (5) The licensee shall maintain documentation pertaining to staff training in the personnel records, as specified in Section 87566(c)(2). For on-the-job training, documentation shall consist of a statement or notation, made by the trainer, of the content covered in the training. Each item of documentation shall include a notation that indicates which of the criteria of Section 87565(c)(3) is met by the trainer.

87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)**87565**

- (d) All personnel shall be given on the job training or have related experience in the job assigned to them. This training and/or related experience shall provide knowledge of and skill in the following, as appropriate for the job assigned and as evidenced by safe and effective job performance:
 - (1) Principles of good nutrition, good food preparation and storage, and menu planning.
 - (2) Housekeeping and sanitation principles.
 - (3) Skill and knowledge required to provide necessary resident care and supervision, including the ability to communicate with residents.
 - (4) Knowledge required to safely assist with prescribed medications which are self-administered.
 - (5) Knowledge necessary in order to recognize early signs of illness and the need for professional help.
 - (6) Knowledge of community services and resources.
- (e) In facilities licensed for sixteen (16) or more, the requirements of Section 87565(d) shall be met with planned on the job training program that utilizes orientation, skill training and continuing education.
- (f) All personnel, including the licensee and administrator, shall be in good health, and physically and mentally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a chest x-ray or an intradermal test, performed by a physician not more than six (6) months prior to or seven (7) days after employment or licensure. A report shall be made of each screening, signed by the examining physician. The report shall indicate whether the person is physically qualified to perform the duties to be assigned, and whether he/she has any health condition that would create a hazard to him/herself, other staff members or residents. A signed statement shall be obtained from each volunteer affirming that he/she is in good health. Personnel with evidence of physical illness or emotional instability that poses a significant threat to the well-being of residents shall be relieved of their duties.

87566 PERSONNEL RECORDS (Continued)**87566**

- (11) A health screening as specified in Section 87565.
- (12) Hazardous health conditions documents as specified in Section 87565.
- (13) For employees that are required to be fingerprinted pursuant to Section 80019:
 - (A) A signed statement regarding their criminal record history.
 - (B) Documentation of either a criminal record clearance or a criminal record exemption.

(b) Personnel records shall be maintained for all volunteers and shall contain the following:

- (1) A health statement as specified in Section 87565(e).
- (2) Health screening documents as specified in Section 87565(e).
- (3) For volunteers that are required to be fingerprinted pursuant to Section 87219:
 - (A) A signed statement regarding their criminal record history.
 - (B) Documentation of either a criminal record clearance or a criminal record exemption.

(c) Licensees shall maintain in the personnel records verification of required staff training and orientation.

(1) The following staff training and orientation shall be documented:

(A) For staff who assist with personal activities of daily living, there shall be documentation of at least ten hours of initial training within the first four weeks of employment, and at least four hours of training annually thereafter in one or more of the content areas as specified in Section 87565(c)(2).

(B) For staff who provide direct care to residents with dementia in a facility in which the licensee advertises dementia special care, programming, and/or environments, the licensee shall document the following:

- 1. The orientation received as specified in Section 87725.1(a)(1).

87566 PERSONNEL RECORDS (Continued)**87566**

2. The in-service training received as specified in Section 87725.1(a)(2).
- (2) Documentation of staff training shall include:
 - (A) Trainer's full name;
 - (B) Subject(s) covered in the training;
 - (C) Date(s) of attendance; and
 - (D) Number of training hours per subject.
 1. If the training is provided by a trainer in a classroom setting, documentation shall consist of notices of course completion signed by the trainer.
 2. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.
 3. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.
- (d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in Section 87564.2 or the recertification requirements in Section 87564.3.
 - (e) In all cases, personnel records shall demonstrate adequate staff coverage necessary for facility operation by documenting the hours actually worked.
 - (f) All personnel records shall be maintained at the facility and shall be available to the licensing agency for review.
 - (1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily available to the licensing agency at the facility upon request.
 - (2) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy the personnel records upon demand during normal business hours.
 - (g) All personnel records shall be retained for at least three (3) years following termination of employment.

NOTE: Authority cited: Sections 1569.30 and 1569.616, Health and Safety Code. Reference: Sections 1569.30, 1569.31, 1569.312, 1569.613, 1569.616, 1569.625, and 1569.626, Health and Safety Code.

87568 **ADMISSION AGREEMENTS (Continued)****87568**

(10) Other conditions under which the agreement may be terminated.

- (d) If additional services are available through the facility to be purchased by the residents, such as cosmetology, and these are not specified in the admission agreement, a list of these services and charges shall be posted in a location accessible to residents.
- (e) Such agreements shall be dated and signed, acknowledging the contents of the document, by the resident and the resident's responsible person or conservator and the licensee or the licensee's designated representative no later than seven days following admission. Attachments to the agreement may be utilized as long as they are also dated and signed.
- (f) The licensee shall retain in the resident's file the original of the initial admission agreement and all subsequent modifications.
 - (1) The licensee shall provide a copy of the current admission agreement to the resident and the resident's responsible person or conservator, if any.
- (g) The licensee shall comply with all terms and conditions set forth in the admission agreement. No written or oral contract with any other person shall release the licensee from responsibility for provision of safe and healthful facilities, equipment, and accommodations.
- (h) The agreement shall be automatically terminated by the death of the resident, whose relatives shall not be liable for any payment beyond that due at the date of death, unless agreed to in writing or ordered by the court.
- (i) No licensee shall enter into any continuing care contract with any person without approval by the Department in accordance with Health and Safety Code, Chapter 10, Division 2.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.159, 1569.30, 1569.31, 1569.312, 1569.313, 1569.54, and 1770 et seq., Health and Safety Code.

87569 MEDICAL ASSESSMENT**87569**

- (a) Prior to a person's acceptance as a resident, the licensee shall obtain and keep on file, documentation of a medical assessment, signed by a physician, made within the last year. The licensee shall be permitted to use the form LIC 602 (Rev. 9/89), Physician's Report, to obtain the medical assessment.
- (b) The medical assessment shall include, but not be limited to:
 - (1) A physical examination of the resident indicating the physician's primary diagnosis and secondary diagnosis, if any and results of an examination for communicable tuberculosis, other contagious/infectious diseases or other medical conditions which would preclude care of the person by the facility.
 - (2) Documentation of prior medical services and history and current medical status including, but not limited to height, weight, and blood pressure.
 - (3) A record of current prescribed medications, and an indication of whether the medication should be centrally stored, pursuant to Section 87575(h)(1).
 - (4) Identification of physical limitations of the person to determine his/her capability to participate in the programs provided by the licensee, including any medically necessary diet limitations.
 - (5) The determination whether the person is ambulatory or nonambulatory as defined in Section 87101(a) or (n), or bedridden as defined in Section 87582(d). The assessment shall indicate whether nonambulatory status is based upon the resident's physical condition, mental condition or both.
 - (6) Information applicable to the pre-admission appraisal specified in Section 87583.
- (c) The licensee shall obtain an updated medical assessment when required by the Department.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, and 1569.54, Health and Safety Code.

87570 RESIDENT RECORDS**87570**

- (a) A separate record shall be maintained for each resident. Such record shall be current and complete and shall be maintained in the facility or in a central administrative location readily available to facility staff and to Department staff.
- (b) Each record shall contain at least the following information:
- (1) Resident's name and Social Security number.
 - (2) Dates of admission and discharge.
 - (3) Last known address.
 - (4) Birthdate.
 - (5) Religious preference, if any, and name and address of clergyman or religious advisor, if any.
 - (6) Names, addresses, and telephone numbers of responsible persons, defined by Section 87101(r), to be notified in case of accident, death, or other emergency.
 - (7) Name, address and telephone number of physician and dentist to be called in an emergency.
 - (8) Reports of the medical assessment specified in Section 87569, and of any special problems or precautions.
 - (9) The documentation required by Section 87702.1(a) for residents with an allowable health condition.
 - (10) Ambulatory status.
 - (11) Continuing record of any illness, injury, or medical or dental care, when it impacts the resident's ability to function or the services he needs.
 - (12) Current centrally stored medications as specified in Section 87575.
 - (13) The admission agreement and pre-admission appraisal, specified in Sections 87568 and 87583.
 - (14) Records of resident's cash resources as specified in Section 87227.

87570 RESIDENT RECORDS (Continued)**87570**

(15) Documents and information required by the following:

- (A) Section 87583, Pre-Admission Appraisal - General;
- (B) Section 87584, Functional Capabilities;
- (C) Section 87585, Mental Condition;
- (D) Section 87586, Social Factors;
- (E) Section 87587, Reappraisals; and
- (F) Section 87588, Documentation and Support.

(c) All information and records obtained from or regarding residents shall be confidential.

- (1) The licensee shall be responsible for storing active and inactive records and for safeguarding the confidentiality of their contents. The licensee and all employees shall reveal or make available confidential information only upon the resident's written consent or that of his designated representative.

(d) Original records or photographic reproductions shall be retained for a minimum of three (3) years following termination of service to the resident.

(e) All resident records shall be open to inspection and audit, by the licensing agency or Department and shall be subject to reproduction upon demand, at a reasonable cost, during normal business hours.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, 1569.32, 1569.54, and 1569.73, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

87571 REGISTER OF RESIDENTS**87571**

(a) In all licensed facilities, the following shall apply:

- (1) A current register of all residents in the facility shall be maintained; shall be updated as needed; shall be immediately available to licensing staff upon request; and shall contain the following information:
 - (A) Resident's name and ambulatory status as specified in Sections 87570(b)(1) and (9).
 - (B) Information on resident's attending physician, as specified in Section 87570(b)(7).
 - (C) Information on the resident's responsible person, as specified in Section 87570(b)(6).
- (2) The register shall be kept in a central location at the facility.
 - (A) The register shall be treated as confidential information pursuant to Section 87570(c).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Section 1569.315, Health and Safety Code.

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87581 NIGHT SUPERVISION (Continued)**87581**

- (4) Every additional 100 residents, or fraction thereof, shall require an additional one (1) staff person on duty, on the premises and awake.
- (5) In facilities required to have a signal system, specified in Section 87691, at least one night staff person shall be located to enable immediate response to the signal system. If the signal system is visual only, that person shall be awake.
- (6) The requirements of this section shall not prohibit compliance with additional supervisory requirements required by the State Fire Marshal.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

87582 ACCEPTANCE AND RETENTION LIMITATIONS**87582**

- (a) Acceptance or retention of residents by a facility shall be in accordance with the criteria specified in this article and in the Incidental Medical Services, Section 87700, and the following.
- (b) The following persons may be accepted or retained in the facility:
 - (1) Persons capable of administering their own medications.
 - (2) Persons receiving medical care and treatment outside the facility or who are receiving needed medical care from a visiting nurse.
 - (3) Persons who because of forgetfulness or physical limitations need only be reminded or to be assisted to take medication usually prescribed for self-administration.
 - (4) Persons with problems including, but not limited to, forgetfulness, wandering, confusion, irritability, and inability to manage money.
 - (5) Persons with mild temporary emotional disturbance resulting from personal loss or change in living arrangement.
 - (6) Persons who are under 60 years of age whose needs are compatible with other residents in care, if they require the same amount of care and supervision as do the other residents in the facility.

87582 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)**87582**

- | (c) No resident shall be accepted or retained if any of the following apply:
 - (1) The resident has active communicable tuberculosis.
 - (2) The resident requires 24-hour, skilled nursing or intermediate care.
 - | (3) The resident's primary need for care and supervision results from either:
 - | (A) An ongoing behavior, caused by a mental disorder, that would upset the general resident group; or
 - | (B) Dementia, unless the requirements of Section 87724, Care of Persons with Dementia, are met.
 - | (4) The resident is bedridden, other than for a temporary illness or for recovery from surgery, except as otherwise provided in Section 87582(f).
- (d) For the purposes of this section, "bedridden" means any of the following:
 - (1) An applicant or resident who requires assistance in turning and repositioning in bed and is unable to leave a building unassisted under emergency conditions.
 - (2) An applicant or resident who is unable to independently transfer to and from bed and is unable to leave a building unassisted under emergency conditions.
- (e) For the purposes of this section, "temporary illness" means any illness which persists for 14 days or less.
- (f) A bedridden resident may be retained in a residential care facility for the elderly in excess of 14 days if all the following requirements are satisfied:
 - (1) The facility notifies the department in writing regarding the temporary illness or recovery from surgery.

87582 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)**87582**

- (2) The facility submits to the department, with the notification, a physician and surgeon's written statement to the effect that the resident's illness or recovery is of a temporary nature. The statement shall contain an estimated date upon which the illness or recovery will end or upon which the resident will no longer be confined to a bed.
- (3) The department determines that the health and safety of the resident is adequately protected in that facility and that transfer to a higher level of care is not necessary.
- (g) Notwithstanding the length of stay of a bedridden resident, every facility admitting or retaining a bedridden resident, as defined in this section, shall, within 48 hours of the resident's admission or retention in the facility, notify the local fire authority with jurisdiction in the bedridden resident's location of the estimated length of time the resident will retain his or her bedridden status in the facility.
- (h) A resident suspected of having a contagious or infectious disease shall be isolated, and a physician contacted to determine suitability of the resident's retention in the facility.
- (i) Renumbered to Section 87701.1 by Manual Letter No. CCL-93-01, effective 3/7/93.
- (j) Renumbered to Section 87342.1 by Manual Letter No. CCL-93-01, effective 3/7/93.

| NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.54, 1569.699, and 1569.72, Health and Safety Code.

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87590 BASIC SERVICES (Continued)**87590**

- (e) If the resident is an SSI/SSP recipient, then the basic services shall be provided and/or made available at the basic rate at no additional charge to the resident.
- (1) This shall not preclude the acceptance by the facility of voluntary contributions from relatives or others on behalf of an SSI/SSP recipient.

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- (A) The Social Security Administration has interpreted Federal Regulations (20 CFR 416.1102, 416.1103, and 416.1145) to mean that any contribution given directly to the facility on behalf of an SSI/SSP recipient will not count as income (i.e., will not reduce the recipient's SSI/SSP check) if the payment is used for items other than food, clothing or shelter (e.g., care and supervision).

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- (2) An extra charge to the resident shall be allowed for a private room if a double room is made available but the resident prefers a private room, provided the arrangement is documented in the admissions agreement and the charge is limited to 10% of the Board and Room portion of the SSI/SSP grant.
- (3) An extra charge to the resident shall be allowed for provision of special food services or products beyond that specified in (f)(2) below, when the resident wishes to purchase the services and agrees to the extra charge in the admission agreement.
- (f) Basic services shall at a minimum include:
- (1) Safe and healthful living accommodations and services, as specified in Section 87577.
- (2) Three nutritionally well-balanced meals and snacks made available daily, including low salt or other modified diets prescribed by a doctor as a medical necessity, as specified in Section 87576.
- (3) Personal assistance and care as needed by the resident and as indicated in the pre-admission appraisal, with those activities of daily living such as dressing, eating, bathing and assistance with taking prescribed medications, as specified in Section 87578.
- (4) Regular observation of the resident's physical and mental condition, as specified in Section 87591.

87590 BASIC SERVICES (Continued)**87590**

- (5) Arrangements to meet health needs, including arranging transportation, as specified in Section 87575.
- (6) A planned activities program which includes social and recreational activities appropriate to the interests and capabilities of the resident, as specified in Section 87579.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312 and 1569.313, Health and Safety Code, and Section 11006.9 and Section 12350, Welfare and Institutions Code.

87591 OBSERVATION OF THE RESIDENT**87591**

The licensee shall ensure that residents are regularly observed for changes in physical, mental, emotional and social functioning and that appropriate assistance is provided when such observation reveals unmet needs. When changes such as unusual weight gains or losses or deterioration of mental ability or a physical health condition are observed, the licensee shall ensure that such changes are documented and brought to the attention of the resident's physician and the resident's responsible person, if any.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

87592 RESIDENT COUNCILS**87592**

The facility shall permit the formation of a resident council by interested residents, provide space and post notice for meetings, and provide assistance in attending meetings for those residents who request it. In order to permit a free exchange of ideas, at least part of each meeting shall be allowed to be conducted without the presence of any facility personnel. Residents shall be encouraged, but shall not be compelled to attend. The purpose of such an organization shall be to work with the administration in improving the quality of life for all residents by enriching the activity program and to discuss the services offered by the facility and make recommendations regarding identified problems.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30, 1569.31 and 1569.312, Health and Safety Code.

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS 87593

- (a) The licensee shall be permitted to accept emergency placements by an adult protective services (APS) agency, if the licensee has received approval from the Department to provide emergency shelter services.
- (1) To obtain approval, the licensee shall submit a written request to the Department. The request shall include, but not be limited to, the following:
- (A) A letter of interest from the county APS agency stating that if the request to provide emergency shelter services is approved, the APS agency may enter into an agreement with the licensee to provide such services.
1. A copy of the written agreement between the APS agency and the licensee, listing the responsibilities of each party, shall be sent to the Department within seven calendar days of signing.
- (B) A written addendum to the Plan of Operation, specified in Section 87222, that includes procedures for the intake of an APS emergency placement. The addendum shall specify how the licensee will meet the needs of a resident placed on an emergency basis, such as on-call staff, additional staff and training.
1. The procedures shall include, but not be limited to, provisions for a private room.
- a. The licensee shall provide a private room for the resident until a pre-admission appraisal of the resident's individual service needs has been completed, specified in Section 87583.
- b. The Department may approve an alternative to a private room, such as awake or additional staff, but an alternative shall not be approved if it displaces staff or other residents of the facility.
- (C) A licensee of a residential care facility for the elderly may accept an adult resident, 18 through 59 years of age, for emergency placement under the following conditions:
1. The APS agency has written a statement indicating a local need exists for the licensee to accept emergency placements of adults 18 through 59 years of age.
- a. The licensee attaches this APS statement of local need [Section 87593(a)(1)(C)1.] to the written request, specified in Section 87593(a)(1).
- b. The licensee must request a statement each year from the APS agency, indicating a local need still exists as specified in Section 87593(a)(1)(C)1., and submit the statement to the Department.

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS(Continued)**87593**

- (b) The Department shall provide written approval or denial of a licensee's request to provide emergency shelter services within 15 working days of its receipt.
- (c) The licensee shall comply with the regulations in Title 22, Division 6, Chapter 8 (Residential Care Facilities for the Elderly), unless otherwise stated in Section 87593. These regulations include, but are not limited to, the following:
 - (1) The licensee shall not exceed the capacity limitations specified on the license and shall not allow rooms approved only for ambulatory residents to be used by nonambulatory residents, as specified in Section 87110.
 - (2) The licensee shall meet the requirements in Section 87220 on fire clearance if the licensee has accepted a nonambulatory resident, defined in Section 87101(n)(2).
- (d) The licensee shall not accept the following persons as APS emergency placements:
 - (1) Individuals with prohibited health conditions [Section 87701].
 - (2) Individuals with restricted health conditions [Section 87701.1].
 - (A) The licensee may accept an APS emergency placement who is incontinent when the requirements in Section 87708 are met.
 - (3) Individuals who are receiving hospice care [Section 87716].
 - (4) Individuals who have active communicable tuberculosis [Section 87582(c)(1)].
 - (5) Individuals who require 24-hour, skilled nursing or intermediate care [Section 87582(c)(2)].
 - (6) Individuals whose primary need for care and supervision results from an ongoing behavior, caused by a mental disorder, that would upset the general resident group [Section 87582(c)(3)(A)].
 - (7) Individuals who are bedridden, as defined in Section 87582(d).
- (e) If a licensee accepts an APS emergency placement with dementia, the licensee shall meet the requirements in Section 87724, Care of Persons with Dementia.

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS(Continued)**87593**

- (1) Repealed by Manual Letter No. CCL-04-12, effective 7/3/04.
- (f) The licensee shall not admit an APS emergency placement unless the APS worker is present at the facility at the time of admission.
- (g) Prior to acceptance of an APS emergency placement, the licensee shall obtain and keep on file the following information received from the APS worker:
- (1) Resident's name.
 - (2) Resident's ambulatory status.
 - (3) Name(s) and telephone number(s) of the resident's physician(s).
 - (4) Name(s), business address(es), and telephone number(s) of the APS worker responsible for the resident's placement and the APS case worker, if known.
 - (5) Name, address, and telephone number of any person responsible for the care of the resident, if available.
- (h) Within seven calendar days of an APS emergency placement, the licensee shall obtain other resident information specified in Section 87570.
- (1) The resident must have a tuberculosis test [Section 87569(b)(1)] by the seventh day of placement even though the test results may not be available by the seventh day of placement.
- (i) The licensee shall contact the resident's attending physician or the person authorized to act for the physician to identify all of the resident's prescribed medications and usage instructions [Section 87569(b)(3)] by the next working day, but no later than 72 hours from the initial APS emergency placement.
- (1) The attending physician or the person acting for the physician shall have access to the resident's records to determine whether the full medication regimen is accounted for and accurate.

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS (Continued)**87593**

- (2) If medication verification, as specified in Section 87593(i), has not been obtained within 72 hours from the resident's initial placement, the licensee shall contact the APS worker to request that the resident be relocated, as specified in Section 87593(j).
- (j) The licensee shall contact the APS worker to request that the resident be relocated immediately when the licensee identifies that needs cannot be met or that the resident has a condition specified in Section 87593(d).
 - (1) A licensee cannot retain a resident under age 60 beyond 30 calendar days from initial placement by the APS agency, unless the acceptance and retention requirement provided in Section 87582(b)(6) is met.
- (k) Within seven calendar days of the licensee making any changes to an agreement with an APS agency, the licensee shall notify the Department in writing of these changes, which may include a renewed agreement, amended language and/or notification of a terminated agreement.
- (l) All emergency placements are subject to the same record requirements as set forth in Section 87570(d).

NOTE: Authority cited: Sections 1569.30 and 1569.31, Health and Safety Code; and Senate Bill 2199 (Chapter 946, Statutes of 1998), Section 14 uncodified. Reference: Sections 15610.13 and 15763, Welfare and Institutions Code; and Sections 1569.1, 1569.2, 1569.312, 1569.315, 1569.316, 1569.47, 1569.54, 1569.698, 1569.699, 1569.71, 1569.72, and 1569.73, Health and Safety Code.

87724 CARE OF PERSONS WITH DEMENTIA**87724**

- (a) This section applies to licensees who accept or retain residents diagnosed by a physician to have dementia. Mild cognitive impairment, as defined in Section 87101(m), is not considered to be dementia.
- (b) In addition to the requirements as specified in Section 87222, the plan of operation shall address the needs of residents with dementia, including:
 - (1) Procedures for notifying the resident's physician, family members and responsible persons who have requested notification, and conservator, if any, when a resident's behavior or condition changes.
 - (2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.
- (c) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following:
 - (1) The facility has a nonambulatory fire clearance for each room that will be used to accommodate a resident with dementia who is unable to or unlikely to respond either physically or mentally to oral instructions relating to fire or other dangers and to independently take appropriate actions during emergencies or drills.
 - (2) The disaster and mass casualty plan, as required in Section 87223, addresses the safety of residents with dementia.
 - (3) In addition to the on-the-job training requirements in Section 87565(d), staff who provide direct care to residents with dementia shall receive the following training as appropriate for the job assigned and as evidenced by safe and effective job performance:
 - (A) Dementia care including, but not limited to, knowledge about hydration, skin care, communication, therapeutic activities, behavioral challenges, the environment, and assisting with activities of daily living;
 - (B) Recognizing symptoms that may create or aggravate dementia behaviors, including, but not limited to, dehydration, urinary tract infections, and problems with swallowing; and
 - (C) Recognizing the effects of medications commonly used to treat the symptoms of dementia.
 - (4) There is an adequate number of direct care staff to support each resident's physical, social, emotional, safety and health care needs as identified in his/her current appraisal.

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (A) In addition to requirements specified in Section 87581, Night Supervision, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a pre-admission appraisal, reappraisal or observation to require awake night supervision.
- (5) Each resident with dementia shall have an annual medical assessment as specified in Section 87569, Medical Assessment, and a reappraisal done at least annually, both of which shall include a reassessment of the resident's dementia care needs.
 - (A) When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident.
- (6) Appraisals are conducted on an ongoing basis pursuant to Section 87587, Reappraisals.
- (7) An activity program shall address the needs and limitations of residents with dementia and include large motor activities and perceptual and sensory stimulation.
- (d) In addition to requirements specified in Section 87691, Maintenance and Operation, safety modifications shall include, but not be limited to, inaccessibility of ranges, heaters, wood stoves, inserts, and other heating devices to residents with dementia.
- (e) Swimming pools and other bodies of water shall be fenced and in compliance with state and local building codes.
- (f) The following shall be stored inaccessible to residents with dementia:
 - (1) Knives, matches, firearms, tools and other items that could constitute a danger to the resident(s).
 - (2) Over-the-counter medication, nutritional supplements or vitamins, alcohol, cigarettes, and toxic substances such as certain plants, gardening supplies, cleaning supplies and disinfectants.
- (g) As required by Section 87572(a)(12), residents with dementia shall be allowed to keep personal grooming and hygiene items in their own possession, unless there is evidence to substantiate that the resident cannot safely manage the items.
 - (1) Evidence means documentation from the resident's physician that the resident is at risk if allowed direct access to personal grooming and hygiene items.

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (h) Outdoor facility space used for resident recreation and leisure shall be completely enclosed by a fence with self-closing latches and gates, or walls, to protect the safety of residents.
- (i) The licensee may use wrist bands or other egress alert devices worn by the resident, with the prior written approval of the resident or conservator, provided that such devices do not violate the resident's rights as specified in Section 87572, Personal Rights.
- (j) The licensee shall have an auditory device or other staff alert feature to monitor exits, if exiting presents a hazard to any resident.
- (k) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
 - (1) The licensee shall notify the licensing agency immediately after determining the date that the device will be installed.
 - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
 - (3) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.
 - (4) Without violating Section 87572, Personal Rights, facility staff shall attempt to redirect a resident who attempts to leave the facility.
 - (5) Residents who continue to indicate a desire to leave the facility following redirection shall be permitted to do so with staff supervision.
 - (6) Without violating Section 87572, Personal Rights, facility staff shall ensure the continued safety of residents if they wander away from the facility.
 - (7) For each incident in which a resident wanders away from the facility unsupervised, the licensee shall report the incident to the licensing agency, the resident's conservator and/or other responsible person, if any, and to any family member who has requested notification. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.
 - (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents who leave the facility.
 - (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (l) The following initial and continuing requirements shall be met for the licensee to lock exterior doors or perimeter fence gates:
 - (1) Licensees shall notify the licensing agency of their intention to lock exterior doors and/or perimeter fence gates.
 - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
 - (3) The licensee shall obtain a waiver from Section 87572(a)(6), to prevent residents from leaving the facility.
 - (A) Facility staff shall attempt to redirect any unaccompanied resident(s) leaving the facility.
 - (4) The licensee shall maintain either of the following documents in the resident's record at the facility:
 - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
 - (B) A written statement signed by each non-conserved resident that states the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
 - (5) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
 - (6) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.
 - (7) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
 - (8) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.

NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1569.2, 1569.30, 1569.31, 1569.312, 1569.698, 1569.699, and 13131, Health and Safety Code.

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING,
AND/OR ENVIRONMENTS****87725**

- (a) In addition to the requirements in Section 87724, Care of Persons with Dementia, licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall meet the following requirements:
- (1) The licensee shall ensure that direct care staff who provide care to any resident(s) with dementia meet the training requirements in Section 87725.1, including six hours of resident care orientation within the first four weeks of employment and eight hours of in-service training per year on the subject of serving residents with dementia.
 - (A) Direct care staff includes staff used for staff mealtime and break relief.
 - (B) Direct care staff may provide dementia special care to residents in the facility or in designated areas of the facility.
 - (2) In addition to the requirements specified in Sections 87222(a) and 87724(b), the licensee shall include in the plan of operation a brief narrative description of the following facility features:
 - (A) Philosophy, including, but not limited to, program goals/objectives in relation to meeting the needs of residents with dementia.
 - (B) Pre-admission assessment, including the types of assessment tools used to determine residents' dementia care needs and who will participate in the assessment.
 - (C) Admission, including the following items that must be addressed when admitting a resident who requires dementia special care:
 1. Specification of the designated areas in the facility where dementia special care is provided, which may be the entire facility or only parts of it.
 2. Services available specific to residents with dementia.
 3. Procedures in place to ensure that the plan of operation is available for review upon request, as required by Section 87725(a)(3).
 - (D) Assessment(s), including the following as they pertain to residents receiving dementia special care:
 1. Types of assessments used;

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING,
AND/OR ENVIRONMENTS (Continued)****87725**

2. Who will participate in resident assessments and procedures for ensuring the opportunity for resident and family involvement; and
 3. Frequency of assessments.
- (E) Activity program for residents with dementia, including, but not limited to:
1. Types of activities;
 - a. Activities may include cognitive/mental stimulation (e.g., crafts, reading, writing, music, current events, reminiscences, movies); physical activities (e.g., gross and fine motor skills); work activities and life skills; social activities; cultural/religious activities; sensory activities; individual/group activities (e.g., games); pet care; and outdoor activities (e.g., field trips, gardening).
 2. Frequency of activities; and
 3. The process to determine what types of activities shall be planned to encompass residents' needs.
 - a. These needs are based on personal preferences, age, beliefs, culture, values, attention span, and life experiences (e.g., family and friend involvement, favorite pastimes, occupations, and geographic areas lived in and visited).
- (F) Staff qualifications. Describe the experience and education required for prospective direct care staff who will provide dementia special care.
- (G) Staff training. Describe the required training for direct care staff who provide dementia special care. At a minimum, the description shall include information on the time frame for training, as specified in Section 87725.1(a)(2), and the training topics, as specified in Section 87725.1(a)(2)(A).
- (H) Physical environment, including environmental factors that ensure a safe, secure, familiar and consistent environment for residents with dementia.

87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS (Continued) 87725

1. Environmental factors that may be considered include: bedroom decor; architectural and safety features (e.g., wide hallways, handrails, delayed egress, secured perimeters); lighting; colors and visual contrasts; types of furniture; signs; noise factors; memory boxes; nourishment and hydration stations; and functional outdoor space and exercise pathways.
- (I) Changes in condition. Procedures to be followed when a resident's condition changes, including, but not limited to, an explanation of:
 1. When a new care plan is required;
 2. At what point a physician (if any) is involved in developing a care plan;
 3. Special techniques/programs (if any) used for managing specific types of behavior; and
 4. The conditions that would require a resident to be relocated.
- (J) Success indicators, including procedures to:
 1. Ensure an ongoing review of facility programs pertaining to care of residents with dementia;
 2. Make necessary adjustments to better meet residents' needs; and
 3. Assess the program's overall effectiveness/success.
 - a. Examples of areas that may be reviewed include incident reports, staffing levels, input from others, and resident participation in program activities.
- (3) The admission agreement, as specified in Section 87568(e), shall inform the resident and the resident's responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the facility's plan of operation and that the plan of operation is available for review upon request.
- (4) The licensee shall maintain copies of all facility advertisements and marketing/promotional material that indicate the licensee provides special care, programming, and/or environments for residents with dementia or related disorders, and shall maintain the information for a minimum of three years.

87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, 87725
AND/OR ENVIRONMENTS (Continued)

- (A) This material shall be available to the public upon request.
 - (B) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this material upon demand during normal business hours.
- (b) Licensees who will discontinue advertising, promoting, or otherwise holding themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall:
- (1) Provide written notification to the licensing agency and to the resident and the responsible person, if any, or the conservator, at least 30 calendar days prior to discontinuing advertising or promoting dementia special care, programming, and/or environments.
 - (A) The notification shall specify the date that the licensee will cease advertising or promoting dementia special care, programming, and/or environments; and, therefore, shall no longer be required to meet the requirements specified in Section 87725(a) and the training requirements in Section 87725.1.
 - (B) The licensee shall maintain a copy of the written notification in each resident's records.
 - (2) On the date specified in the notification, cease all advertisements, publications, and/or announcements that pertain to dementia special care including, but not limited to, those in magazines, newspapers, consumer reports, telephone directory yellow pages, professional or service directories, Internet, radio and/or television commercials.
 - (A) Long-term advertisements, such as yellow pages, shall be removed at the next renewal date.
 - (3) On the date specified in the notification, remove all written references that indicate that the licensee provides dementia special care, programming, and/or environments from all promotional material, advertisements, and/or printed material, including admission agreements and the plan of operation.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.15, 1569.22, 1569.31, 1569.312, 1569.33, 1569.355, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS****87725.1**

- (a) Licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall ensure that all direct care staff, described in Section 87725(a)(1), who provide care to residents with dementia, meet the following training requirements:
- (1) Direct care staff shall complete six hours of orientation specific to the care of residents with dementia within the first four weeks of working in the facility.
- (A) This orientation shall be repeated if either of the following occur:
1. An employee returns to work for the same licensee after a break in service of more than 180 consecutive calendar days; or
 2. An employee goes to work for another licensee to provide dementia special care.
- (B) This orientation shall be separate from other training and be exclusively on the care of residents with dementia.
- (C) Various methods of instruction may be used, including, but not limited to, presenters knowledgeable about dementia; video instruction tapes; interactive material; books; and/or other materials approved by organizations or individuals specializing in dementia as specified in Section 87725.1(a)(2)(C).
1. Instruction may include up to two hours of mentoring and hands-on training from direct care staff who have completed six hours of orientation specific to the care of residents with dementia and eight hours of in-service training on the subject of serving residents with dementia as specified in Sections 87725.1(a)(1) and (2).
- (D) The licensee shall maintain in the personnel records documentation on the orientation that includes the date(s), the hours provided, the names of staff in attendance, and the method(s) of instruction used.
- (2) Direct care staff shall complete at least eight hours of in-service training on the subject of serving residents with dementia within 12 months of working in the facility and in each succeeding 12-month period. Direct care staff hired as of July 3, 2004 shall complete the eight hours of in-service training within 12 months of that date and in each succeeding 12-month period.

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS**
(Continued)**87725.1**

- (A) A minimum of two of the following training topics shall be covered annually, and all topics shall be covered within a three-year period:
1. Effects of medications on the behavior of residents with dementia;
 2. Common problems, such as wandering, aggression, and inappropriate sexual behavior;
 3. Positive therapeutic interventions and activities such as exercise, sensory stimulation, activities of daily living, and social, recreational and rehabilitative activities.
 4. Communication skills (resident/staff relations);
 5. Promoting resident dignity, independence, individuality, privacy and choice; and
 6. End of life issues, including hospice.
- (B) Training may be provided at the facility or offsite and may include a combination of observation and practical application.
- (C) The training shall be developed by, or in consultation with, an individual(s) or organization(s) with expertise in dementia care and with knowledge on the training topic areas specified in Section 87725.1(a)(2)(A).
1. Examples of organizations that specialize in dementia care include, but are not limited to: the Alzheimer's Association, Alzheimer's Disease Diagnostic and Treatment Centers affiliated with the University of California, Family Caregiver Alliance and Caregiver Resource Centers, American Society on Aging, colleges and universities, and individuals with educational and professional qualifications specific to dementia.
 - a. If the consultant and trainer are the same person(s), the documentation requirements specified in Sections 87725.1(a)(2)(D) and (F) shall both be met.
- (D) The licensee shall maintain the following documentation for the consultant(s) described in Section 87725.1(a)(2)(C):

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS**
(Continued)

87725.1

1. Name, address, and telephone number;
2. Date(s) when consultation was provided;
3. Organization affiliation (if any), as specified in Section 87725.1(a)(2)(C), and/or educational and professional qualifications specific to dementia; and
4. The training topics, specified in Section 87725.1(a)(2)(A), for which consultation was provided.

(E) All trainers shall meet the following education and experience requirements:

1. A minimum of eight hours of certifiable continuing education or three semester units, or the equivalent, from an accredited educational institution, on topics relevant to caring for individuals with dementia.
 - a. Examples of acceptable instruction include, but are not limited to, classes in aging, gerontology, geriatrics, and/or psychosocial needs of the elderly.
2. One of the following experience requirements:
 - a. Current employment as a consultant with expertise in dementia care, as specified in Section 87725.1(a)(2)(C).
 - b. Two years full-time experience, or the equivalent, within the last four years, as an RCFE administrator or as a direct care provider for individuals with dementia.

(F) The licensee shall maintain the following documentation on the trainer(s) described in Section 87725.1(a)(2)(E):

1. Name, address, and telephone number;
2. Topics/subject matter taught;
3. Dates/hours of training provided;

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS**
(Continued)**87725.1**

4. Notation that indicates which of the criteria for experience the trainer meets, as specified in Section 87725.1(a)(2)(E)2., and maintain verification of qualifying criteria; and
 5. Proof of completion of the educational requirements, as specified in Section 87725.1(a)(2)(E)1., which may include the following:
 - a. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.
 - b. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.
- (G) The documentation required in Sections 87725.1(a)(2)(D) and (F) shall be retained for at least three years following the date consultation services/training were provided.
1. The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this documentation upon demand during normal business hours.
- (H) The licensee shall maintain in the personnel records documentation on the in-service training required in Section 87725.1(a)(2) for direct care staff and include the training topic(s) covered, as required in Section 87725.1(a)(2)(A).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, and 1569.626, Health and Safety Code.

**87725.2 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING,
AND/OR ENVIRONMENTS AS OF JULY 3, 2004****87725.2**

- (a) Licensees who will no longer advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall meet all of the requirements of Section 87725(b) no later than October 31, 2004.
- (b) Licensees who continue to advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall comply with the requirements in Sections 87725(a) and 87725.1 as of July 3, 2004, with the following exceptions:
 - (1) No later than October 31, 2004, the licensee shall:
 - (A) Submit to the licensing agency the additional requirements for the plan of operation that have not been submitted previously, as described in Section 87725(a)(2).
 - (B) Amend the admission agreement to inform the resident and the responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the plan of operation and are available for review upon request. Requirements in Sections 87568(e) and (f) shall also be met.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.

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